

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Jan ELLINGSEN et al.

Application No.: I0/010,I40

Confirmation No.: 4761

Filed: December 6, 2001

Art Unit: 3738

For: MEDICAL PROSTHETIC DEVICES AND
IMPLANTS HAVING IMPROVED
BIOCOMPATIBILITY

Examiner: D. J. Isabella

INFORMATION DISCLOSURE STATEMENT UNDER CFR 1.97(i)

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

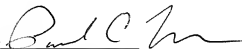
Applicants request that the three U.S. patent references listed on the attached Form PTO/SB/08 be placed in the record of the above-captioned application, under the provisions of 37 C.F.R. §1.97(i). It is believed that separate consideration of these references is not necessary.

If the Examiner has any questions concerning this IDS, he is requested to contact Eugene T. Perez (Reg. No. 48,501) at the offices of the undersigned. If it is determined that this IDS has been filed under the wrong rule, the PTO is requested to consider this IDS under the proper rule and charge the appropriate fee to Deposit Account No. 02-2448.

If necessary, the Commissioner is hereby authorized in this, concurrent, and future replies, to charge payment or credit any overpayment to Deposit Account No. 02-2448 for any additional fees required under 37 C.F.R. § 1.16 or under 37 C.F.R. § 1.17; particularly, extension of time fees.

Dated: November 21, 2006

Respectfully submitted,

By 
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Attachment(s)

Substitute for form 1449/PTO				Complete if Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)				Application Number	10/010,140-Conf. #4761
				Filing Date	December 6, 2001
				First Named Inventor	Jan ELLINGSEN
				Art Unit	3738
				Examiner Name	D. J. Isabella
Sheet	1	of	1	Attorney Docket Number	0104-0527PUS1

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number-Kind Code ² (if known)			
AA*		US-5,205,921-A	05-27-1993	Shirkanzadeh	
AB*		US-6,544,288-B2	04-08-2003	Osaka et al.	
AC*		US-6,723,038-A	03-03-1998	Shannweber et al.	

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. ¹	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	†*
		Country Code ³ -Number ⁴ -Kind Code ² (if known)				

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. *CITE NO.: Those application(s) which are marked with a single asterisk (*) next to the Cite No. are not supplied (under 37 CFR 1.99(a)(2)(ii)) because that application was filed after June 30, 2003 or is available in the IFW. ¹ Applicant's unique citation designation number (optional). ² See Kind Code of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

NON PATENT LITERATURE DOCUMENTS					
Examiner Initials	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.			†*

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.

Examiner Signature	Date Considered
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